

Index of Claims
Application No.
Applicant(s)
Examiner
Art Unit

<input checked="" type="checkbox"/>	Rejected
=	Allowed

<input type="checkbox"/>	(Through numeral) Cancelled
<input type="checkbox"/>	Restricted

<input type="checkbox"/>	Non-Elected
I	Interference

<input type="checkbox"/>	Appeal
O	Objected

Claim	Date
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Claim	Date
Final	Original
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Claim	Date
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